



Mental Health and Disability Services Redesign 2011

Information on Out of State Placements/Providers

Source: DHS

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What Out of State Placements Offer

- Trained Staff - Behavioral Analysts, Masters/Doctoral Interns, Licensed/Credentialed Professional Staff, Unit Staff
- Evaluations/Assessments - Neuropsychological Assessments, Psychiatric Evaluations, Interventions/Strategies to address behaviors, Development of Behavior Support Plans
- 1:1 staffing if warranted; fade the 1:1 staffing gradually as the youth has more control over his/her behaviors and emotions
- Handle complex medical conditions
- Use of SKYPE during Family Therapy
- Use of SKYPE during Individual Therapy if warranted
- Specialized Programs - RAD/Trauma, Brittle Diabetes, Sex Offender, Self-Injurious Behaviors, Autism/Asperger's Syndrome Disorder/PDD, Pre-Vocational Program, Brain Injury, Native American program, Intellectual Disability, Eating Disorders, Sexualized Behaviors
- Networking with Iowa providers - building programs pre/post work
- ROPES Course - builds confidence and teamwork, brings out the youth's leaderships qualities

Out of State Provider Responses to Specific Questions

Responses from 3 of the 7 providers contacted.

Do you offer your staff specialized training to deal with specific issues, e.g. behavioral, autistic, intellectual disabilities, aggression, DBT, self injurious behaviors, etc.?

Lakeview : Our staff are trained in dealing with many different disabilities and neurological conditions. They receive on-going training in preventative strategies, as well as crisis intervention. Following individualized assessments, we identify the best methods for intervening with that child and develop intervention protocols for them. There are a variety of therapies available that may be utilized based on the child's needs, including DBT. We serve children from many different states with severe

behavioral and medical need across all cognitive levels. Our philosophy of care is to identify what the child needs to be successful, while teaching the child the necessary skills to increase their independence and success. This is largely based on providing many opportunities for appropriate choices and teaching alternative appropriate behaviors. We then work with the home community, parents, and school to provide these supports and train them on the individual needs of that child so that they can continue to succeed following discharge, while decreasing their need for re-hospitalization and re-admittance.

Devereux Colorado: Yes, ongoing training is mandatory at all Devereux facilities for all staff.

Piney Ridge: Piney Ridge Center offers specialized staff training to deal with sexual perpetration in both males and females. We employ a consultant that trains our therapists and staff members in this highly specialized area. We have programs designed for aggression that use a behavioral modification program. We are also able to accept children with medical issues such as cystic fibrosis, diabetes and others that require additional medical care due to RN's being on shift. We have therapists that are substance abuse credentialed and offer treatment tracks for children with these needs.

Is it your ability to have 1:1 staff supervision?

Lakeview: Intensive supervision is sometimes a necessary component of care, especially when the child struggles with impulse control issues, and the severity of potential harm is great.

Devereux Colorado: Yes.

Piney Ridge: We do have the ability to staff at a 1:1 staffing ratio. Additionally all units are staffed at 1:4 staffing ratio at all times during waking hours.

Is it that a higher rate allows you to offer additional supports/services to these children?

Lakeview: Our facility has a number of resources on site that provide additional support and crisis management assistance when needed. However, the resources could be available via out-patient services, but this can lead to a disjointed team that may not have appropriate communication across team members.

Devereux Colorado: Yes, an additional \$15.00/hour.

Piney Ridge: Our higher rate does allow for additional services and staff members to support children that have higher levels of difficulty. The additional rate also allows for the flexibility to provide 1:1 staffing in order to reduce the amount of time that a child may need hospitalization.

What is the average size of your units? Are they smaller to allow for more staff/client time and supervision?

Lakeview : Our units for children range between 10-15 per unit.

Devereux Colorado: Our units vary in size and are pretty much dependent upon the physical size of the units. We run a 4:1 ratio on the residential units regardless of size and our smallest unit is 6 beds and our larger units have 18 beds.

Piney Ridge: The average size of our units is 10-12 children. The unit size allows us to spend more time with each individual client as well as decrease the amount of disturbance within the milieu.

Do you have policies that prohibit you from denying admissions?

Lakeview: We have a review process to identify what supports would be necessary to provide services for the referral. If the primary clinical team has concerns, the referral is then reviewed by the administrator and if he has concerns, then it is reviewed by our Corporate Clinical Director for final approval / denial.

Devereux Colorado: Yes, we have a small amount of exclusionary criteria. Although all cases are on a case by case basis, the following is a list of exclusionary criteria: Chemical Dependency as main treatment focus (detox), Mental Retardation/Developmentally Disabled (IQ below 70 - case by case), Extreme Fire Setting, Highly Suicidal and/or lethal self injury, extremely assaultive, Serious Contagious Disease/Mental Instability, Pregnant Females, and Aggressive Sexual Offenders.

Piney Ridge: We do have a policy that allows us to deny admissions. We can deny for various reasons to include, IQ, functioning, current milieu etc.

What is your typical staff/client ratio?

Lakeview: Our typical staff / client ratio is 1:3 or 1:4, but this varies depending on the needs of the children.

Devereux Colorado: 4:1 ratio – Residential; 6:1 ratio – School; 10 or 12:1 ratio - Overnights

Piney Ridge: Typical staffing ratios are 1:4 during waking hours and 1:6 during sleeping hours.

Is your program a locked setting? Does this level of security allow you to take some children that you may not otherwise?

Lakeview: We are not a locked facility, however we are able to take many children with elopement risks and serve them successfully.

Devereux Colorado: The State of Colorado recognizes us as a non-locked, staff-secured facility. Colorado does not allow for locked residential programs. However, the units are equipped with delayed egress doors. We cannot accept high run-risk clients due to these restraints but combat AWOL's with our high staff to client ratios.

Piney Ridge: We are a locked residential. This type of security allows us to take children that have eloped from other treatment facilities.

What Iowa Providers identify as reasons for denying an admission

- 'too behavioral'
- 'too acute' due to self-injurious behaviors - some liability issues in the past with DIA and licensing for foster group care
- 'cannot secure funding for 1:1 staffing needs'
- 'don't have the staff to provide 1:1 staffing even if the money were available'
- 'will not fit into current milieu'
- 'safety issues in the milieu'